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14 0 CT 20 PM 3: 29 STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only (Check if name is 1. NAME OF Example: If typing, type COMMITTEE (in full) over the lines. 12FE4M5 changed) Bellows For Senate ADDRESS (number and street) P.O. Box 136 (Check if address is changed) Manchester STATE CITY ZIP CODE COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address) (Check if address is changed) HQ@bellowsforsenate.com COMMITTEE'S WEB PAGE ADDRESS (URL) www.bellowsforsenate.com ☐(Check if address is changed) 2. DATE 10/14/2014 3. FEC IDENTIFICATION NUMBER C00550434 4. IS THIS STATEMENT NEW (N) OR ✓ AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer Signature of Treasurer NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C 437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: **FEC FORM 1** Use Federal Election Commission Only (Revised 02/2009) Toil-free 800-424-9530

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